

### State of Idaho

Ben Ysursa Secretary of State

LOBBYIST MONTHLY REPORT FOR	L	OB	$\mathbf{BY}$	IST	$\Gamma$ $N$	40	AC.	IV	ΉΙ	Y	REP	ORT	F	OR	Ł]	١
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To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

03 FEB 11 PA 3: 35 OF STAIL OF STAIL

	(Type or print See instruction								51/	AIE I	Ur IVAR	IJ	
Lobbyist	s name and permanent b						D	ate p	repared		Peri	od cover	red
	lly Steckel											✓ n	nonth ending
	l West Bannock se, ID 83702								2/10/0	8	(1)	/lo.)	(Day) (Yr.)
	00, 12 00, 02										į	1	31 08
Item 1	Totals of all rep	ortable	expendit	ures made o	r incur	red by Lobl	yist o	or by	Lobbyist's Empl	loyer o	n behalf of Lo	bbyist's	Employer.
Reimbu	tegory of Expenditure rsed Personal Living and Tra s Pertaining to Lobbying Act			mount for		ortionate amo 3, at bottom			outed by each emp	loyer (I	dentify emplo	yers, un	der
Do	Not Have to be Reported				E	mployer No.	1		Employer No. 2	Er	nployer No. 3	E	mployer No. 4
Entertai Food an	nment d Refreshment	5	\$	21.72	<b>\$</b> _	0.0	00	\$_	0.00	<b>\$</b> _	0.0	<u>o</u> s _	0.00
Living A	ccommodations												
Advertis	sing							_				_	
Travel													
Telepho	ne			<del> </del>	_			_					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Other E	xpenses or Services		<del> </del>									-   -	
	Tota	al S	§	21.72	<b>s</b> _	0.0	00	\$_	0.00	s _	0.0	0 \$	0.00
					ļ							1	
	he number of employer The totals of each exp					<del> </del>			<del></del>	<del></del>			
2	Date		Plac		ones (		mount						Officials in Group
П	ontinued on attached pa	ge(s)											
<u> </u>	· · · · · · · · · · · · · · · · · · ·						Ite		En	nplover(	s) Name(s) and	l Addres	s(es)
	1.	NSTR	UCTION	is					1				
	should file this form 617 Idaho Code	: Any	/ lobbyist	registered u	nder S	ection	No. 1		aho Telephon O. Box 1638,				
	g deadline: Monthleh for activities of the			vithin ten (1	10) day	ys of the	No. 2		idAmerican N .O. Box 657, I				y, LLC <b>⊞</b>
то і	BE FILED WITH:		Ysursa				No. 3		linnesota Mini	_		• •	
		PO B	ary of Stat ox 83720 0 83720-0				No. 4		.O. Box 33225	o, St. 1	Paul, MN (	5133	
	Phone: (208) 3				282		110. 4						

Item 4						er in the nature of contributions or for or on behalf of any Legisla		ey or other tangible or intangible blic or Executive Official.
	I	Date	Amount	Nar	ne of	Legislator, Public or Executive Off	icial Re	ceiving or Benefiting
	Subjet or He the Let Code table)	cot matter buse Bill, obbyist w Bill, Re Legislat	of proposed legislatic Resolution or other as supporting or op- esolution or Other ive Ident. Number	ion, the number of the Senate legislative activity in which	Code 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	LEGISLATIVE SUE  Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, godernment, godernment, godernment, godernment, special districts Government, special districts Government, state  CERTIFICATION: I hereby certificative traces of the property of	25 26 27 28 29 30 31	IDENTIFICATION  Subject  Health service, medicine, drugs and controlled substances, health insurance, hospitals  Higher education  Housing, construction, codes  Insurance (excluding health insurance)  Labor, salaries and wages, collective bargaining  Law enforcement, courts, judges, crimes, prisons  License, permits  Liquor  Manufacturing, distribution and services  Natural resources, forest and forest products, fisheries, mining and mining products  Public lands, parks, recreation  Social insurance, unemployment insurance, public assistance, workmen's compensation  Transportation, highways, streets and roads  Utilities, communications, televisions, radio, newspaper, power, CATV, gas  Other (please specify)
						Lobbyist signature	•	Date

## Rev. 06/2006

### State of Idaho

Ben Ysursa Secretary of State

# LOBBYIST MONTHLY REPORT FORM

To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

)RM	Page	of	Page(s)
60 FCD	THIS SPACE	FOR OFFI	CE USE ONLY
SIATE	OF IDA		-

(Type or print clearly in black ink) See instructions at bottom of page							
Lobbyist's name and permanent business address		Dat	e prepared	i	Period c	overed	
Molly Steckel			- Freehande		<b>□</b>	<b>-</b>	ding
601 West Bannock			2/10/0	R	(Mo.)	(Day)	(Yr.)
Boise, ID 83702			2/10/0	•	<b>'</b> '	1	l ` ´
· · · · · · · · · · · · · · · · · · ·				<u>-</u>	1 1	31	80
Totals of all reportable expenditures made or incur	rred by Lobb	yist or	by Lobbyist's Empl	oyer on behalf	of Lobby	ist's Emplo	yer.
Category of Expenditure Prop	ortionate amo		tributed by each empl	oyer (Identify	employers	, under	
Expenses Pertaining to Lobbying Activity All Employers		<del>.</del>		Ι		F7 1	
Do Not Have to be Reported E	mployer No.	1	Employer No. 2	Employer 1	No. 3	Employer	No. 4
Entertainment Spood and Refreshment \$ 21.72 \$	0.0	00	0.00	\$	21.72	\$	0.00
Living Accommodations							
Advertising							
Travel						***************************************	
Telephone							
Other Expenses or Services							
Total S 21.72 S	0.0	00	0.00	s	21.72	\$	0.00
						***************************************	
*When the number of employers you are reporting for requires mul							on Page 1.
The totals of each expenditure of more than fifty dollars (							i C
2 Date Place	Ar	nount	Names of Legis	iators, Public ar	id Executiv	ve Officials	in Group
Continued on attached page(s)							····
INSTRUCTIONS		Item 3	En	nployer(s) Name	(s) and Add	dress(es)	
		No. 1	American Coun	cil of Engine	erina Co	os (Idaho	Chap.)
Who should file this form: Any lobbyist registered under S 67-6617 Idaho Code	ection	NO. 1	P. O. Box 8224,	_	_		
Filing deadline: Monthly reports due within ten (10) da month for activities of the past month.	ys of the	No. 2	EDS 5400 Legacy D	rive, HC-3A-	-34, Plar	no, TX <i>75</i>	5024 <b>#</b>
TO BE FILED WITH:							
Ben Ysursa		No. 3	Idaho Medical		ID	••	
Secretary of State PO Box 83720			305 West Jeffe	rson, Boise,	ID 837	02	
Boise, ID 83720-0080		No. 4	Idaho Psycholo	gical Associ	ation		
Phone: (208) 334-2852 Fax: (208) 334-2282			P.O. Box 1347.	-			#

	Е	Date Amount	Nai	ne of	Legislator, Public or Executive Off	icial Re	eceiving or Benefiting
Item 5	or Ho		ion, the number of the Senate legislative activity in which oposing.	Cod	LEGISLATIVE SUE		IDENTIFICATION  subject
ubject	Code	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	T
17	table)	Rule Docket 24-2401-0701 (Employer 3)  Rule Docket 17-0208-0702 (Employer 3)	and Section Number	02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state	18 19 20 21 22 23 24 25 26 27 28 29 30	and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)
6	bid or	y any rule, ratemaking dec bid process, financial service ting or opposing.	ision, procurement, contract, es or bond lobbyist was		CERTIFICATION: I hereby certificorrect statement in accordance with the control of the control o		